IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

application of:

Reiley

Docket No.: 9414.17206-CIP DIV

Serial No.:

10/700,283

Examiner: T. Barrett

Filed:

3 November 2003

Group Art Unit: 3738

For:

Ankle Replacement System

Mail Stop Non-Fee Amendment Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450



PATENT TRADEMARK OFFICE

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

- 2. Applicant is
 - [x] a small entity
 - [] other than a small entity.

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United State Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed as follows: Mail Stop Non-Fee Amendment, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Linda S. Wenzel
Type or print name of person majing paper

(Signature of person mailing paper)

Date: 13 August 2004

EXTENSION OF TERM

	Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment at expiration of the shortened statutory period.				complete response has been tiled after a r entry of an additional amendment after	
	a Notice the time	of Appea ly-filed res	se has been filed after a Final Office Actional or filing and/or entry of an additional amb ponse placed the application in condition to futury period, the period has ceased to ru	endment after expiration for allowance. Of course.	of the shortened statutory period unless if a Notice of Appeal has been filed within	
NOTE:	See 37 reexami	CFR 1.6	45 for extensions of time in Interference oceadings.	proceedings and 37	CFR 1.550(c) for extensions of time in	
3.	The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply					
			(complete (a) or (b)	(a) or (b) as applicable)		
	(a)	[]	Applicant petitions for an exte 1.17(a)-(d) for the total number	nsion of time unde or of months check	er 37 CFR 1.136 (fees: 37 CFR sed below:	
	Extens (month one m two me three r four m	hs) onth onths months onths	Fee for other to Small Entity \$ 110.00 \$ 420.00 \$ 950.00 \$1480.00 \$2010.00		Fee for Small Entity 5 55.00 6 210.00 6 475.00 6 740.00 6 1005.00	
			Fee: \$			
	If an a	dditiona	al extension of time is required p	lease consider this	a petition therefor.	
			(check and complete the ne	ext item, if applical	ole)	
[] An extension for months has already been secured an therefor of \$ is deducted from the total fee due for the of extension now requested.			een secured and the fee paid al fee due for the total months			
		Extens	sion fee due with this request: \$	· •		
			OR			
	(b)	[x]	Applicant believes that no conditional petition is being mainadvertently overlooked the new terms of the conditions of the new terms of the ne	de to provide for th	m is required. However, this ne possibility that applicant has or extension of time.	

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

_	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee (Small Entity)	Additional Fee (Large Entity)
Total Claims 37 CFR 1.16(c)*	10	-20 =	(10)	x \$ 9.00	\$0	\$0
Independent Claims (37 CFR 1.16(b)**	3	-3 =	0	x \$ 43.00	\$ 0	\$0
First Presentation of Multiple Dependent claim(s) if any (37 CFR 1.16(d))				\$145.00	\$0	\$0
Total Additional Fee					\$0	\$0

•	If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20"
••	If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING: "After final rejection or action (S 1.113) amendments may be made cancelling claims or complying with any requirement of form which has been made." 37 CFR S 1.116(a) (emphasis added).

(complete (c) or (d) as applicable)

(c)	[x]	No additional fee for claims is required.
		OR
(d)	[]	Total additional fee for claims required \$
		FEE PAYMENT
[]	Attached is a check in the sum of \$	
[]	Char	ge Account No the sum of \$
		A duplicate of this transmittal is attached.

5.

FEE DEFICIENCY

NOTE:

If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. [x] If any overpayment of fees or additional extension and/or fee is required, charge Account No. ___06-2360.

AND/OR

[x] If any overpayment of fees 06-2360	If any overpayment of fees or additional fee for claims is required charge Account No			
_	Gotticia a Humbach SIGNATURE OF ATTORNEY			
	SIGNATURE OF ATTORNEY			
Reg. No.: 50,295	Patricia A. Limbach			
	TYPE OR PRINT NAME OF ATTORNEY			
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